

REQUEST FOR PATENT FEE REFUND

1 Date of Request: <u>8-5-94</u>		2 Serial/Patent # <u>286189</u>								
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED							
<input checked="" type="checkbox"/>	Filing		<u>8-5-94</u>							
<input type="checkbox"/>	Amendment		\$ <u>148.00</u>							
<input type="checkbox"/>	Extension of Time		\$							
<input type="checkbox"/>	Notice of Appeal/Appeal		\$							
<input type="checkbox"/>	Petition		\$							
<input type="checkbox"/>	Issue		\$							
<input type="checkbox"/>	Cert of Correction/Terminal Disc.		\$							
<input type="checkbox"/>	Maintenance		\$							
<input type="checkbox"/>	Assignment		\$							
<input type="checkbox"/>	Other		\$							
		7 TOTAL AMOUNT OF REFUND								
		\$ <u>148.00</u>								
		8 TO BE REFUNDED BY:								
		Treasury Check								
		Credit Deposit A/C #:								
		9 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; text-align: center;">1</td><td style="width: 20px; text-align: center;">9</td><td style="width: 20px; text-align: center;">--</td><td style="width: 20px; text-align: center;">2</td><td style="width: 20px; text-align: center;">2</td><td style="width: 20px; text-align: center;">5</td><td style="width: 20px; text-align: center;">3</td></tr></table>		1	9	--	2	2	5	3
1	9	--	2	2	5	3				
10 REASON:										
<input checked="" type="checkbox"/>	Overpayment									
<input type="checkbox"/>	Duplicate Payment									
<input type="checkbox"/>	No Fee Due (Explanation):									
11 REFUND REQUESTED BY:										
TYPED/PRINTED NAME: <u>EVERETT R. WILLIAMS</u>		TITLE: <u>EXAMINER</u>								
SIGNATURE: <u>E. R. Williams</u>		PHONE: <u>308-0501</u>								
OFFICE: <u>ONAR</u>										
***** THIS SPACE RESERVED FOR FINANCE USE ONLY: *****										
APPROVED: <u>Don Everett</u>		DATE: <u>11/22/94</u>								

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to: